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PICK-UP	☐ WAIT	MAIL MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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O6 MAR 23 FN 3: 3: SECHE NEW FINALE

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: CAPITAL FIRST LENDING, INC. (Name of corporation - must include suffix)
(Name of corporation - inust include sumx)
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
GREGORY HELLMAN
(Name of Person)
CAPITAL FIRST LENOWG, INC
(Firm/Company)
CAPITAL FIRST LENOWG, INC (Firm/Company) (Address)
(Address)
GOLDEN, CO. 8040 / (City/State and Zip code)
(City/State and Zip code)
For further information concerning this metter, where palls
For further information concerning this matter, please call:
(2006000 HELLMAN) = (202) 914-0600
(Name of Person) at (303) 9/4-0600 (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: MAILING ADDRESS:
New Filing Section Division of Corporations New Filing Section Division of Corporations
Clifton Building P.O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$\sum \text{\$78.75 Filing Fee & } \text{\$878.75 Filing Fee & } \text{\$87.50 Filing Fee, } \text{Certificate of Status & Certified Copy} \text{Certified Copy}

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF THE 3: 37
1. CAPITAL FIRST LENDING, INC. SECRETARY OF STATE (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," (ASSITE OR OR)).
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," ASSITE TORID." "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
N/A
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. COLORADO (State or country under the law of which it is incorporated) 3. 84 16 0 16 46 (FEI number, if applicable)
4. 08/27/2001 5. PERPETUAL (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. <u>N/A</u>
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7.601 16 ^{7H} 5T, *C319, GOLDEN, CO. 80401 (Principal office address)
(Can-
(Current mailing address)
8. OBGINATE MORTGAGE LOANS
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: ELIZABETH ANN TOMLIN
Office Address: 5006 AOLARIS COVE
GREEN ACRES, Florida 33463
(City) (Zip code)
10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

A. DIRECTORS	American State of the State of
Chairman:	ocuso
Address:	06 MAR 23 PM 3: 37
	SECRETARY OF STATE TALL AHASSES FLORIDA
Vice Chairman:	
Address:	
——————————————————————————————————————	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
///	
Address: 60/ 16 45, 403/9	
GOLDEN, CO 80401	
Vice President:	
Address:	
Secretary: GREGORY HELLMAN	
Address: (SAME)	
Treasurer:	
Address:	
NOTE: If necessary/you may attach an addendum to the application listing	g additional officers and/or directors.
13	
(Signature of Director or Officer listed in number 12 of the Control of the State o	
14. GREGORY HELLMAN - PRESIDENT (Typed or printed name and capacity of person sign	ing application)

OFFICE OF THE SECRETARY OF STATE 06 MAR 23 PM 3: 37 OF THE STATE OF COLORADO

CERTIFICATE

SECRETARY OF STATE FALL AHASSEF FLORIDA

I, Ginette Dennis, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

CAPITAL FIRST LENDING, INC.

is a Corporation

formed or registered on 08/27/2001 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20011167633

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 03/03/2006 that have been posted, and by documents delivered to this office electronically through 03/08/2006 @ 00:01:52 .

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 03/08/2006 @ 00:01:52 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 6434158.



Ginette Dennis

Secretary of State of the State of Colorado

*************End of Certificate*************************

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, http://www.sos.state.co.us/bis/CertificateScarchCriteria.do/entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.vos.shate.co.us/click Business Center and select "Frequently Asked Questions.